

INTERNATIONAL STANDARDIZATION AGREEMENT RATIFICATION - IMPLEMENTATION DATA SHEET

For use of this form, see AR 34-1; the proponent agency is DCSLOG

1a. AGREEMENT NO.	1b. AGREEMENT TITLE
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2. REFERENCE

3. Ratification

THE ☐ U.S. ARMED FORCES ☐ ARMY ☐ NAVY ☐ AIR FORCE WILL

- ☐ a. Not subscribe to the subject agreement/amendment,
☐ (1) until enclosed comments have been resolved by the proper panel, group, and/or working party.
☐ (2) for reasons stated on enclosure.
- ☐ b. Subscribe to the subject agreement/amendment,
☐ (1) with suggested editorial comments enclosed.
☐ (2) with reservation(s) specified on the enclosure.
☐ (3) without comment or reservation.

4. Implementation

ACTION TO IMPLEMENT SUBJECT AGREEMENT IS REQUIRED BY APPROPRIATE DOD AGENCIES AND SERVICES BY INCORPORATING THE PROVISIONS OF AGREEMENT IN APPROPRIATE U.S. DOCUMENTATION (*FMS, Service Regs, MILSPECS, Standards, etc.*).

- ☐ a. The U.S. documentation listed below is affected.
☐ (1) Change
☐ (2) Revision is scheduled on the dates indicated below.
- ☐ b. There is no existing document. The document can be prepared and published _____ month(s) from the date of agreement promulgation.
- ☐ c. The subject agreement is fully implemented in the documents listed below. Further actions are not required.
- ☐ d. _____ is the agency responsible for implementation.

5. Implementing Documents (*Continue List on Separate Sheet*)

a. NO.	b. TITLE	c. PROPONENT	d. DATE (Mo./Yr.)	e. PROPOSED CHANGE/REV. (Mo./Yr.)

f. RETROFIT

- ☐ a. Retrofit has been considered in the implementation of this agreement and:
☐ (1) Recommend present equipment not be retrofitted. Reason specified on enclosure.
☐ (2) Recommend present equipment be retrofitted. Reason specified on enclosure.
- ☐ b. Retrofit not applicable to this agreement.

g. EVALUATION

(1) This agreement should be evaluated by (*check appropriate block*). (*Recommended frequency based on nature of the agreement.*)

(a) Document Review Every (<i>specify years</i>)		(c) Test Activity Every (<i>specify years</i>)	
(b) Equipment Review Every (<i>specify years</i>)		(d) Combined Exercise Every (<i>specify years</i>)	

(2) This agreement has been evaluated (*check and specify date.*)

(a) Document Review		(c) Test Activity	
(b) Equipment Review		(d) Combined Exercise	

h. ☐ PLAN OF INSTRUCTION (*POI*). Provisions of this agreement should be incorporated in the following POI (*DOD or Service School*).

6a. OFFICE OF PRIMARY RESPONSIBILITY	6b. SIGNATURE		6c. DATE
7a. TYPED NAME OF ACTION OFFICER	7b. GRADE	7c. SERVICE/OFFICE SYMBOL	7d. TELEPHONE NO.